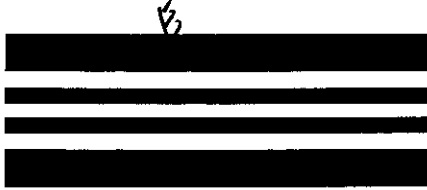


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ENT 79789:2014 PG 1 of 2
JEFFERY SMITH
UTAH COUNTY RECORDER
2014 Nov 05 1:51 pm FEE 12.00 BY ED
RECORDED FOR CT LIEN SOLUTIONS

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141	
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 11033 - SUSQUEHANNA	
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	45550457 UTUT FIXTURE

File with: Utah, UT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME SUBWAY DOWNTOWN PROVO 180 N, LLC					
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 551 EAST STATE RD		CITY AMERICAN FORK	STATE UT	POSTAL CODE 84003	COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME SUSQUEHANNA COMMERCIAL FINANCE, INC.					
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 2 COUNTRY VIEW ROAD, SUITE 300		CITY MALVERN	STATE PA	POSTAL CODE 19355	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:
All assets of debtor (hereinafter referred to as "Collateral"), including but not limited to:

All goods, including all machinery, equipment fixtures, appliances and furniture now owned or hereafter acquired, wherever located, together with all inventory now owned, or hereafter acquired and products and proceeds thereof. All accounts contract rights, and accounts receivable now owned or hereafter in existence and all proceeds thereof and all returned or repossessed goods arising from or relating to any of said accounts or rights, including but not limited to all subleases of inventory and equipment and rental contracts pertaining thereto. All substitutions and replacements for, accessions, attachments, and other additions to, and tools, parts, inventory and equipment used in connection with the above property. All property similar to the above hereafter acquired by debtor. All general intangibles, trade names, copyrights, licenses and good will of debtor now owned or hereafter acquired. All records pertaining to any collateral, including computerized records, and ledgers. All proceeds of all of the foregoing Collateral.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility	6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA: 45550457 134846	

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME SUBWAY DOWNTOWN PROVO 180 N, LLC	
OR	
9b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME				
OR				
10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
10c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME			
OR			
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE
COUNTRY			

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

<p>13. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)</p> <p>15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): BLOCK 29 DEVELOPERS LLC 180 N. UNIVERSTIY AVE PROVO, UT 84601</p>	<p>14. This FINANCING STATEMENT: <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input checked="" type="checkbox"/> is filed as a fixture filing</p> <p>16. Description of real estate: Parcel ID: 53-448-0110</p> <p>EQUIPMENT LOCATION 180 NORTH UNIVERSITY AVE. SUITE 150 PROVO, UT 84601</p> <p>SERIAL NUMBER 53:448:0110</p> <p>Legal Description: UNIT 110, TWO HUNDRED (200) NORTH CONDOS. AREA 0.213 AC.</p>
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17. MISCELLANEOUS: 45550457-UT-49 11033 - SUSQUEHANNA COMMERCIAL SUSQUEHANNA COMMERCIAL File with: Utah, UT 134846